IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF PUERTO RICO

IN RE:

CASE NO 19-06674/EAG

SAUDDY NOEMI HERNANDEZ ONEILL JOAN LAUREANO COLON

CHAPTER 13

DEBTORS

DEBTORS' NOTICE OF FILING OF AMENDED SCHEDULES "I" & "J" OFFICIAL FORMS 1061 & 106J

TO THE HONORABLE COURT:

COME NOW, SAUDDY NOEMI HERNANDEZ ONEILL and JOAN LAUREANO COLON, the Debtors in the above captioned case, through the undersigned attorney, and very respectfully state and pray as follows:

- 1. The Debtors are hereby submitting *Amended Schedules "I" and "J"*, dated December 21, 2023, herewith and attached to this motion.
- 2.The amendments to Schedules "I" and "J" are filed to reflect Debtors' actual income and separate household expenses, in the above captioned case.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the Debtors and to all creditors and interested parties appearing in the master address list, hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 21st day of December, 2023.

/s/Roberto Figueroa Carrasquillo

USDC #203614 RFIGUEROA CARRASQUILLO LAW OFFICE PSC ATTORNEY FOR the DEBTOR PO BOX 186 CAGUAS PR 00726 TEL NO 787-744-7699/787-963-7699

Email: rfc@rfigueroalaw.com

Fill	n this information to identify your c	ase:					
12-000000		DEMI HERNANDEZ O	NEILL				
	tor 2 JOAN LAUR	EANO COLON					
N. C. Araba	use, if filing)						
Unit	ed States Bankruptcy Court for the	: DISTRICT OF PUER	TO RICO				
Cas (If kn	e number 3:19-bk-6674		-			I filing nt showing postpetition ch s of the following date:	apter
	ficial Form 106l chedule I: Your Inc				MM / DD/ YY		
Be a supp	s complete and accurate as possiblying correct information. If you use. If you are separated and youth a separate sheet to this form.	sible. If two married peo are married and not fili or spouse is not filing w	ng jointly, and yeith you, do not in	our spouse is livi nclude informatio	ing with you, inclu on about your spot	de information about youse. If more space is ne	our eded,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	⊠ Employed □ Not employed			☑ Employed☑ Not employed	
	employers. Include part-time, seasonal, or	Occupation	Manager		Data Pro	cessing Specialist	
	self-employed work.	Employer's name	Green Windows Corp		Infokeep	Infokeepers of Puerto Rico	
	Occupation may include student or homemaker, if it applies.	Employer's address	State Road 174 Parque Industrial Minillas Bayamon, PR 00958		100 T T T T T T T T T T T T T T T T T T	PO Box 2353 Toa Baja, PR 00951-2358	
		How long employed to	here? 11 y	ears	6	months	_
Pari	Give Details About Mor	nthly Income					
unles	nate monthly income as of the da as you are separated. If or your non-filing spouse have me a space, attach a separate sheet to	ore than one employer, co					
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			. 2. \$	2,946.67	\$1,618.83	
3.	Estimate and list monthly overt	ime pay.		3. +\$_	0.00	+\$0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4. \$	2,946.67	\$1,618.83	

Debtor 1 SAUDDY NOEMI HERNANDEZ ONEILL Debtor 2 JOAN LAUREANO COLON

For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 2,946.67 1,618.83 List all payroll deductions: Tax, Medicare, and Social Security deductions 439.62 5a. 184.66 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 \$ 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 \$ 5e. Insurance 5e. 0.00 0.00 5f. Domestic support obligations 5f. 0.00 0.00 5g. Union dues 0.00 0.00 5g. 5h. Other deductions. Specify: PR SDI TAX 0.00 4.85 5h.+ S \$ 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 439.62 189.51 6. 7 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 2,507.05 \$ 1,429,32 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 8a. 0.00 8b. Interest and dividends 0.00 8b. 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 Unemployment compensation 8d. 8d. 0.00 0.00 Social Security 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 8g. Pension or retirement income 8q. 0.00 0.00 Other monthly income. Specify: 0.00 8h.+ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 0.00 9 0.00 Calculate monthly income. Add line 7 + line 9. 2.507.05 10. \$ 1,429,32 \$ \$ 3,936.37 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 3,936.37 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? \boxtimes No. Yes. Explain:

3:19-bk-6674

Case number (if known)

Fill in this info	ormation to identify y	our case:							
Debtor 1	SAUDDY NO	DEMI HER	NANDEZ ONEILL		-	neck if t			
Debtor 2 (Spouse, if filing	TOAN EAGNEANTO COLON						 ✓ An amended filing ✓ A supplement showing postpetition chapter expenses as of the following date: 		
United States B	ankruptcy Court for the	: DISTRI	CT OF PUERTO RICO			MM	/ DD / YYYY		
Case number	3:19-bk-6674								
(If known))						
Official I	Form 106J								
Schedu	le J: Your	Expen	ses					12/1	
information.		eded, attac	If two married people and the short in the s						
	escribe Your House	ehold						1	
☐ No. G	joint case? So to line 2. Does Debtor 2 live	in a separ	ate household?						
	☐ No ☑ Yes, Debtor 2 mu	st file Offici	al Form 106J-2, Expenses	s for Separate House	hold of D	ebtor 2			
	have dependents?		2, _,pansa.				•		
	st Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?	
Do not st							200/2017/2017	□ No	
depende	nts names.			: 				☐ Yes ☐ No	
								☐ Yes ☐ No	
				(<u>*</u>				Yes	
								□ No □ Yes	
expense	expenses include es of people other t and your depende	than 🗌	No Yes	13				_ 163	
Estimate you expenses as	of a date after the	our bankri	y Expenses uptcy filing date unless y y is filed. If this is a supp	you are using this fo	orm as a J, check	supple the bo	ement in a Cha	pter 13 case to report f the form and fill in the	
	nses paid for with		jovernment assistance i						
value of such (Official Forn		ave include	ed it on Schedule I: You	· Income			Your expe	enses	
	tal or home owners s and any rent for th		ses for your residence. I r lot.	nclude first mortgage	4.	s		0.00	
If not inc	cluded in line 4:								
4a. Re	eal estate taxes				4a.	_		0.00	
	operty, homeowner'				4b.	_		0.00	
	ome maintenance, re				4c.			0.00	
	omeowner's associa nal mortgage paym		our residence, such as ho	me equity loans	4d. 5.			0.00	
6. Utilities:						126		407.00	
	ectricity, heat, natura				6a.				
	ater, sewer, garbage		atellite, and cable service	e	6b.			045.50	
	elephone, cell phone ther. Specify: Gas		atenite, and cable service	3		- C		35.00	
ou. Ot	alor, openly. Gas	2				*			

Deb	tor 1	SAUDDY NOEMI HERNANDEZ ONEILL		
		JOAN LAUREANO COLON	Case number (if known)	3:19-bk-6674
7.	Food	and housekeeping supplies	7. \$	180.00
8.	Child	dcare and children's education costs	8. \$	
9.	Cloth	ning, laundry, and dry cleaning	9. \$	
10.	Pers	onal care products and services		75.00
11.	Medi	cal and dental expenses	11. \$	42.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12. \$	260.00
13		rtainment, clubs, recreation, newspapers, magazines, and books		
		itable contributions and religious donations	14. \$	65.00 0.00
		rance.	14. Ψ	0.00
	Do n	ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance		0.00
				0.00
		Health insurance	and the same of th	0.00
		Vehicle insurance	15c. \$	0.00
		Other insurance. Specify:	15d. \$	0.00
	Spec		16. \$	0.00
17.		illment or lease payments:		
		Car payments for Vehicle 1	17a. \$	787.00
		Car payments for Vehicle 2	17b. \$	0.00
		Other. Specify:	17c. \$	0.00
		Other. Specify:	17d. \$	0.00
18.		payments of alimony, maintenance, and support that you did not report a posted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	S	0.00
19.		r payments you make to support others who do not live with you.	\$	0.00
	Spec		19.	
20.	Othe	r real property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Your Income.	
	20a.	Mortgages on other property	20a. \$	0.00
	20b.	Real estate taxes	20b. \$	0.00
	20c.	Property, homeowner's, or renter's insurance		0.00
	20d.	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e.	Homeowner's association or condominium dues	20e. \$	0.00
21.	Othe	r: Specify:	21. +\$	0.00
22.	Calc	ulate your monthly expenses		
	22a.	Add lines 4 through 21.	\$	2,110.50
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	s	1,448.87
	22c.	Add line 22a and 22b. The result is your monthly expenses.	s	3,559.37
23.		ulate your monthly net income.		
		Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,936.37
	23b.	Copy your monthly expenses from line 22c above.	23b\$	3,559.37
	23c.	Subtract your monthly expenses from your monthly income.		
		The result is your monthly net income.	23c. \$	377.00
24.	For ex		rou file this form? ur mortgage payment to incre	ease or decrease because of a
		Language 100 Vi		

Debto				DEZ ONEILL	·	Case num	ber (if known)	3:19-bk-6674	
EII is	this information to								
	this information to					٥, .			
Debtor	SAL	JDDY NO	EMI HER	RNANDEZ ONEILL			if this is: n amended filir	na	
Debtor (Spous	se, if filing) JOA	AN LAURE	EANO CO	DLON		□ A	supplement st	howing postpetition chapter the following date:	13
United	States Bankruptcy	Court for the	DISTR	ICT OF PUERTO RICO		N	IM / DD / YYYY	7	
Case n		9-bk-6674							
(II KIIO	····/								
Offi	icial Form	106J-2	2						
Sch	nedule J-2	2: You	r Exp	enses for Sep	arate Hou	sehold	of Debt	tor 2	12/15
Debto form	or 2 have one or only with respec eded, attach anot tion.	more depe t to expens ther sheet	endents in ses for De to this fo	n common, list the dependent	dents on both So ed on Schedule J	chedule J ar J. Be as com	nd this form.	e households. If Debtor 1 Answer the questions on urate as possible. If more umber (if known). Answer	this space
	No. Do not	or 1 mainta t complete		ate households?					
	⊠ Yes Doyou have dep	endents?	⊠ No						
li o	Do not list Debtor ist all other depen of Debtor 2 regard of whether listed a	1 but dents lless as a	Yes.						
	dependent of Debi on Schedule J.	lor 1		Fill out this information for each dependent	Dependent's re Debtor 2	lationship to	Depende age	nt's Does dependent live with you?	
	Do not state the dependents name	s.						□ No □ Yes	
8.9								□ No □ Yes	
								□ No □ Yes	
•								□ No □ Yes	
е	Do your expense expenses of peop yourself and you	ple other ti	han 🗀	No Yes					
Part 2	Estimate Y	our Ongoi	ng Month	ly Expenses					
expen	ises as of a date	after the b	oankrupto non-cash	uptcy filing date unless y sy is filed. government assistance i Schedule I: Your Income	f you know the va	alue of	Your expens	n a Chapter 13 case to rep	ort
	The rental or hon payments and any			nses for your residence. I or lot.	Include first mortg	age 4.	\$	424.00	
If	f not included in	line 4:							
4	a. Real estate	taxes				4a.		0.00	
4				r's insurance		4b.	<u> </u>	0.00	
4				upkeep expenses		4c.	₩ 1	80.00	
4				dominium dues		4d.	\$	0.00	

ebto	r 2 JOAN LAUREANO COLON	Case number (if know	3:19-bk-6674
. Д	additional mortgage payments for your residence, such as home equity loans	5. \$	0.00
. u	Itilities:		
6	a. Electricity, heat, natural gas	6a. \$	95.00
6	b. Water, sewer, garbage collection	(2) (2) (2) (3)	60.00
6	c. Telephone, cell phone, Internet, satellite, and cable services	14700	220.00
6	d. Other Specify: Gas		20.00
F	ood and housekeeping supplies		250.87
	Childcare and children's education costs		0.00
	Clothing, laundry, and dry cleaning		0.00
	Personal care products and services		34.00
	Medical and dental expenses	11. \$	85.00
	ransportation. Include gas, maintenance, bus or train fare.	11. 9	03.00
	Oo not include car payments.	12. \$	150.00
	intertainment, clubs, recreation, newspapers, magazines, and books	13. \$	30.00
	Charitable contributions and religious donations	14. \$	0.00
	nsurance.	7-10 FG	5.00
D	Oo not include insurance deducted from your pay or included in lines 4 or 20.		
1	5a. Life insurance	15a. \$	0.00
1	5b. Health insurance	15b. \$	0.00
1	5c. Vehicle insurance	15c. \$	0.00
1	5d. Other insurance. Specify:		0.00
6. T	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.	SERRE MES	
	Specify:	16. \$	0.00
	nstallment or lease payments:		
	7a. Car payments for Vehicle 1	17a. \$	0.00
	7b. Car payments for Vehicle 2	17b. \$	0.00
	7c. Other. Specify:	17c. \$	0.00
	our payments of alimony, maintenance, and support that you did not report educted from your pay on line 5, Schedule I, Your Income (Official Form 106	as	0.00
	Other payments you make to support others who do not live with you.	s	0.00
	Specify:	19.	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on So		e.
	0a. Mortgages on other property		0.00
	0b. Real estate taxes	221	0.00
2	0c. Property, homeowner's, or renter's insurance	100000 m m	0.00
	0d. Maintenance, repair, and upkeep expenses		0.00
	0e. Homeowner's association or condominium dues	20e. \$	0.00
	Other: Specify:	21. +\$	0.00
	0 8 ***********************************	- AL-STALL	900 V 00 THE PROPERTY AND
	our monthly expenses. Add lines 5 through 21.	\$	1,448.87
C	The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Sche alculate the total expenses for Debtor 1 and Debtor 2.	dule J to	
	ine not used on this form.		
F	To you expect an increase or decrease in your expenses within the year after or example, do you expect to finish paying for your car loan within the year or do you expect y lodification to the terms of your mortgage? No.	you file this form? our mortgage payment to i	increase or decrease because of
7 1.7	Yes. Explain here:		

Debtor 1 SAUDDY NOEMI HERNANDEZ ONEILL

Fill in this info	rmation to identify your	case:			
Debtor 1	SAUDDY NOEMI HERNANDEZ ONEILL				
	First Name	Middle Name	Last Name		
Debtor 2	JOAN LAUREANC	COLON			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Case number	3:19-bk-6674				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attor	rney to help you fill out bankruptcy forms?
⊠ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the sum that they are true and correct.	
X /s/ SAUDDY NOEMI HERNANDEZ ONEILL	X /s/ JOAN LAUREANO COLON
SAUDDY NOEMI HERNANDEZ ONEILL	JOAN LAUREANO COLON
Signature of Debtor 1	Signature of Debtor 2
Date December 21, 2023	Date December 21, 2023

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Label Matrix for local noticing 0104-3 Case 19-06674-EAG13 District of Puerto Rico Old San Juan Thu Dec 21 09:40:26 AST 2023 POPULAR AUTO LLC PO BOX 366818

Banco Popular de Puerto Rico Bankruptcy Department PO Box 366818 San Juan, PR 00936-6818

SAN JUAN, PR 00936-6818

Citibank, N.A. 5800 S Corporate P1 Sioux Falls, SD 57108-5027

Discover Bank
Discover Products Inc
PO Box 3025
New Albany, OH 43054-3025

FIRST BANK
CONSUMER SERVICE CENTER
BANKRUPTCY DIVISION -CODE 248
PO BOX 9146, SAN JUAN PR 00908-0146

(p) JEFFERSON CAPITAL SYSTEMS LLC PO BOX 7999 SAINT CLOUD MN 56302-7999

Money Express PO Box 9146 San Juan, PR 00908-0146

Syncb/Rooms to Go C/o PO Box 965036 Orlando, FL 32896-5036

Synchrony Bank c/o of PRA Receivables Management, LLC PO Box 41021 Norfolk, VA 23541-1021 BANCO POPULAR DE PUERTO RICO, SERVICER FOR F C/O SARLAW LLC BANCO POPULAR CENTER, SUITE 1022 209 MUNOZ RIVERA AVE SAN JUAN, PR 00918-1002

US Bankruptcy Court District of P.R. Jose V Toledo Fed Bldg & US Courthouse 300 Recinto Sur Street, Room 109 San Juan, PR 00901-1964

CICA Collection Agency, Inc PO Box 12338 San Juan, PR 00914-0338

(p)PUERTO RICO TELEPHONE COMPANY DBA CLARO PR PO BOX 360998 SAN JUAN PR 00936-0998

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

(p) INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATIONS PO BOX 7346 PHILADELPHIA PA 19101-7346

LVNV Funding, LLC Resurgent Capital Services PO Box 10587 Greenville, SC 29603-0587

Syncb/Car Care Pep Boy C/o PO Box 965036 Orlando, FL 32896-5036

Syncb/Walmart PO Box 30281 Salt Lake City, UT 84130-0281

Thd/Cbna PO Box 6497 Sioux Falls, SD 57117-6497 (p)RODRIGUEZ FERNANDEZ LAW OFFICE LLC ATTN ISLAND PORTFOLIO AS SERVICER OF FAIRWAY P O BOX 361110 SAN JUAN PR 00936-1110

BANCO POPULAR DE PUERTO RICO SERVICER FOR FREDDIE MAC PO BOX 362708 (762) SAN JUAN PR 00936-2703

Capital One Bank (USA), N.A. by American InfoSource as agent PO Box 71083 Charlotte, NC 28272-1083

DEL VALLE RODRIGUEZ LAW OFFICES PSC LCDO JOSE RAFAEL DEL VALLE RODRIGUEZ PO BOX 10590 SAN JUAN, PR 00922-0590

EASTERN AMERICA INSURANCE CO PO BOX 9023862 SAN JUAN PR 00902-3862

Island Finance PO Box 71504 San Juan, PR 00936-8604

MONEY EXPRESS
CONSUMER SERVICE CENTER
BANKRUPTCY DIVISION (CODE 248)
PO BOX 9146 SAN JUAN PR 00908-0146

Syncb/Jc Penney Pr PO Box 965007 Orlando, FL 32896-5007

Syncb/tjx Cos PO Box 965015 Orlando, FL 32896-5015

UNIVERSIDAD CENTRAL DE BAYAMON PO BOX 1725 BAYAMON, PR 00960-1725 JOAN LAUREANO COLON RR6 BOX 6936 TOA ALTA, PR 00953-9320 JOSE RAMON CARRION MORALES PO BOX 9023884 SAN JUAN, PR 00902-3884 MONSITA LECAROZ ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901

ROBERTO FIGUEROA CARRASQUILLO PO BOX 186 CAGUAS, PR 00726-0186 SAUDDY NOEMI HERNANDEZ ONEILL RR6 BOX 6936 TOA ALTA, PR 00953-9320

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

ISLAND PORTFOLIO SERVICES LLC AS SERVICER OF PO BOX 361110 SAN JUAN, PR 00936 Claro PO Box 360998 San Juan, PR 00936-0998 Internal Revenue Service PO Box 21126 Philadelphia, PA 19114-0326

(d)Island Portfolio Services, LLC as servicer PO BOX 361110 San Juan PR 00936 Jefferson Capital Systems LLC Po Box 7999 Saint Cloud Mn 56302-9617

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(d)Popular Auto PO Box 366818 San Juan, PR 00936-6818

End of Label Matrix
Mailable recipients 34
Bypassed recipients 1
Total 35